

<b>City of Lynchburg</b> <b>Non-Profit Funding Request Application</b>
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1. Agency Name: \_\_\_\_\_  
Address: \_\_\_\_\_  

Street/P.O. Box

City

State

Zip Code

Phone Number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Web Site Address: \_\_\_\_\_
2. Chief Executive Officer: \_\_\_\_\_
3. Agency Fiscal Year: \_\_\_\_\_
4. Funding Request: On an attachment, provide the following information:
  - A. Describe your request for funding. Is this a new or existing program or capital project? Has this program or capital project ever received funding from the City of Lynchburg (including Community Development Block Grant monies)?
  - B. Identify how many clients will be served in the coming year in the corporate limits of the City of Lynchburg and how many are served in each locality of Region 2000. How will you collaborate/partner with other agencies/local governments to strengthen the service delivery of your agency?
5. Program/Capital Project Outcomes: On an attachment, provide the following information:
  - A. Describe the need for this program/project in the corporate limits of the City of Lynchburg. What are the intended outcomes and/or effects of the program/project? Outcomes must be attainable and measurable and should address the impact of the program or project on the City.
6. Impact on Government Services: On an attachment, describe how this program or project impacts the City.
  - A. Does this program or project provide a service currently provided by the City government in a more cost-effective manner? Will the program or project generate revenue to the City (increased taxable real estate value, amusement tax, etc.)?

**Budget Period: July 1, 2004 To June 30, 2005**

**Agency:** \_\_\_\_\_

**Program/Capital Project :** \_\_\_\_\_

<u>REVENUE</u>	<u>FY 2004 BUDGET</u>	<u>FY 2005 PROPOSED BUDGET</u>
<b>Source</b>		
<b>Local Government (be specific):</b>		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>Community Development Block Grant: (be specific by locality)</b>		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>United Way Funding</b>	\$ _____	\$ _____
<b>Federal or State Grants, Contracts &amp; Fees</b>	\$ _____	\$ _____
<b>Foundations</b>	\$ _____	\$ _____
<b>Corporations</b>	\$ _____	\$ _____
<b>Earned Income, Program Fees</b>	\$ _____	\$ _____
<b>Donor Designations from United Way, Combined Federal Campaign and other Federated Campaigns</b>	\$ _____	\$ _____
<b>Community Solution Designations</b>	\$ _____	\$ _____
<b>Individual Contributions/ Service or Civic Clubs</b>	\$ _____	\$ _____
<b>Funding Raising Events &amp; Products</b>	\$ _____	\$ _____
<b>Memberships</b>	\$ _____	\$ _____
<b>Interest Income:</b>	\$ _____	\$ _____
<b>Other (Specify)</b>		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>TOTAL REVENUE</b>	\$ _____	\$ _____

**Budget Period: July 1, 2004 To June 30, 2005**

	<b><u>FY 2004 BUDGET</u></b>	<b><u>FY 2005 PROPOSED BUDGET</u></b>
<b>Expenditures</b>		
Salaries	\$ _____	\$ _____
Benefits/Taxes	\$ _____	\$ _____
Professional Fees	\$ _____	\$ _____
Supplies	\$ _____	\$ _____
Telephone	\$ _____	\$ _____
Postage and Shipping	\$ _____	\$ _____
Occupancy	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Printing/Publications	\$ _____	\$ _____
Travel	\$ _____	\$ _____
Conferences and Fees	\$ _____	\$ _____
Direct Assistance to Clients	\$ _____	\$ _____
Organization Dues	\$ _____	\$ _____
Equipment Rental/Maintenance	\$ _____	\$ _____
Volunteer/Staff Recognition	\$ _____	\$ _____
Miscellaneous	\$ _____	\$ _____
Total Expenses	\$ _____	\$ _____
Balance (Total Revenues – Total Expenses)	\$ _____	\$ _____
 Total Agency Reserves	 \$ _____	 \$ _____
Total Agency Endowment	\$ _____	\$ _____